Submit 5 Copies Appropriate District Office	State of New M nergy, Minerais and Natural F					al Resources Depart nt		CEIVED	Revised	Form C-104 Revised 1-1-89 See Instructions		
DISTRICT I P.O. Box 1980, Hobbs, NM		OIL C	ONS		TION DIVISION				at Botto	en of Page		
DISTRICT II P.O. Drawer DD, Anesia, NM 88210			Santa Fe, New Me									
DISTRICT III 1000 Rio Brazos Rd., Azzec, NM 87410 I. TO TRANSPORT OIL AND NATURAL GAS C. D.												
Operator MERIDIAN OIL INC.					VAD			<u> </u>				
Address	land TV	79705							- .			
21 Desta Dr., Mid Reason(s) for Filing (Check p		13103				Oth	er (Please expid	in)				
New Well X Recompletion	completion Dil Dry Gas											
Change in Operator	Change in Operator Casinghead Gas Condensate											
and address of previous operator												
II. DESCRIPTION OF WELL AND LEASE Lease Name Well No. Pool Name, Including Formation Kind of Lease Lease No.												
Lease Name NORTH SHUGART FEDERAL		1 1			ART (MORROW)			Federal or Federal		2393-C		
Location Unit Letter H												
Section 17	Township	1	85	Range	31E	, N	MPM,		EDDY		County	
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS												
Name of Authorized Transporter of Oil Or Condensate Address (Give address to which approved copy of this form is to be sent)												
Name of Authorized Transporter of Casinghead Gas or Dry Gas X Address (Give address to which approved copy of this form is to be sent)											nt)	
If well produces oil or liquids, give location of tanks.		Unit	Sec.	Twp. Rge.		is gas actually connected? N		When	When ? WAITING O		N PIPELINE	
If this production is commingled with that from any other lease or pool, give commingling order number: IV. COMPLETION DATA												
Designate Type of Co	ompletion .	· (X)	Oil Well		Jas Well X	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Date Spudded 07/05/90		Date Compl. Ready to Prod. 09/23/90				Total Depth 11925			P.B.T.D. 11730			
Elevations (DF, RKB, RT, GR, etc.) 3659' GR		Name of Producing Formation MORROW				Top Oil/Gas Pay			Tubing Depth 2 3/8"@11875'			
Perforations	11606 - 11710							Depth Casing Shoe 11550				
TUBING, CASING AND CEMENTING RECORD												
HOLE SIZE		CASING & TUBING SIZE				DEPTH SET 392'			SACKS CEMENT 420 SX CL 'C' 60SX CIRC			
13 3/8" 8 5/8"		24# & 32#				3495'				1050SX C'LITE & 200SX 'C'		
		23#				4024'			4805X CL 'C'			
4 1/2# V. TEST DATA AND REQUES		11.6#				11925'			625SX	625SX SUPER'H 100SX 'H'		
OIL WELL (Test m	ust be after re	covery of 10	tal volume	of load o	oil and must		exceed top allo			for full 24 hou	rs.)	
Date First New Oil Run To T	Date of Te	a			Producing Method (Flow, pump, gas lift, et							
Length of Test		Tubing Pressure				Casing Pressure			Choke Size			
Actual Prod. During Test		Oil - Bbls.				Water - Bbis.			Gas- MCF			
GAS WELL												
Actual Prod. Test - MCF/D 152.2		Length of Test 24 HRS				Bbis. Condensate/MMCF 0			Gravity of Condensate			
Testing Method (pilor, back pr BACK PRESSUR	BACK PRESSURE		Tubing Pressure (Shut-in) 1648				Casing Pressure (Shui-in) PKR			Choke Size 48/64		
VI. OPERATOR CERTIFICATE OF COMPLIANCE I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above						OIL CONSERVATION DIVISION						
is true and complete to the best of my knowledge and belief.						Date Approved						
Signature	PROD.		YST	By_	<u></u>	<u>.</u>						
ESTELLA M. ALV Printed Name 10/17/90		(915)	Title		Title	<u></u>				<u></u>		
Date Telephone No.							<u> </u>					
						0.1.1.1104		,				

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.

2) All sections of this form must be filled out for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
 Separate Form C-104 must be filed for each pool in multiply completed wells.